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PTO/52/01 (00-04)  
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U.S. Patent and Trademark Office U.S. DEPARTMENT OF COMMERCE

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10632,262
	Filing Date	12/21/2001
	First Named Inventor	Radadi, Peter V.
	Art Unit	2175
	Examiner Name	Naveen Abel-Jallil
	Attorney Docket Number	CSII - 03
Total Number of Pages in This Submission		16

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavit/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CB, Number of CB(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): PTO -2038
Remarks		
<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>		
Firm Name	Joseph E. Chovanes, Esq.	
Signature		
Printed name	Joseph E. Chovanes	
Date	10-20-04	Reg. No. 33,481

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as EXPRESS mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:	
Signature	
Typed or printed name	Joseph E. Chovanes
Date	10-20-04

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## FEE TRANSMITTAL for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	(\$ 215)	<b>Complete if Known</b>
Application Number	10/032,252	
Filing Date	December 21, 2001	
First Named Inventor	Redatti, Peter V.	
Examiner Name	Naveen Abel-Jalli	
Art Unit	2176	
Attorney Record No.	GBI-02	

<h3 style="text-align: center;">METHOD OF PAYMENT (check all that apply)</h3> <p><input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None</p> <p><input type="checkbox"/> Deposit Account:</p> <p>Deposit Account Number: _____</p> <p>Deposit Account Name: _____</p> <p>The Director is authorized to: (check all that apply)</p> <p><input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Credit any overpayments</p> <p><input type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s)</p> <p><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.</p> <h3 style="text-align: center;">FEE CALCULATION</h3> <h4 style="text-align: center;">1. BASIC FILING FEE</h4> <table border="1" style="width: 100%;"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Small Entity Fee Code (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>1001 750</td> <td>2001 395</td> <td>Utility filing fee</td> <td></td> </tr> <tr> <td>1002 350</td> <td>2002 175</td> <td>Design filing fee</td> <td></td> </tr> <tr> <td>1003 650</td> <td>2003 275</td> <td>Plant filing fee</td> <td></td> </tr> <tr> <td>1004 750</td> <td>2004 395</td> <td>Reissue filing fee</td> <td></td> </tr> <tr> <td>1005 180</td> <td>2005 80</td> <td>Provisional filing fee</td> <td></td> </tr> <tr> <td colspan="3" style="text-align: right;"><b>SUBTOTAL (1)</b></td> <td><b>(\$)</b></td> </tr> </tbody> </table> <h4 style="text-align: center;">2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</h4> <p>Total Claims: 24 - 20** = 4 X 0 = 0</p> <p>Independent Claims: 3 - 3** = 0 X 0 = 0</p> <p>Multiple Dependent: _____ X _____ = _____</p> <table border="1" style="width: 100%;"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Small Entity Fee Code (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>1201 18</td> <td>2202 9</td> <td>Claims in excess of 30</td> <td></td> </tr> <tr> <td>1201 88</td> <td>2201 44</td> <td>Independent claims in excess of 3</td> <td></td> </tr> <tr> <td>1203 300</td> <td>2203 150</td> <td>Multiple dependent claim, if not paid</td> <td></td> </tr> <tr> <td>1204 65</td> <td>2204 44</td> <td>** Reissue independent claims over original patent</td> <td></td> </tr> <tr> <td>1205 18</td> <td>2206 9</td> <td>** Reissue claims in excess of 30 and over original patent</td> <td></td> </tr> <tr> <td colspan="3" style="text-align: right;"><b>SUBTOTAL (2)</b></td> <td><b>(\$ 0)</b></td> </tr> </tbody> </table> <p><small>**For number previously paid, if greater. 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<b>SUBMITTED BY</b>		<b>(Complete if applicable)</b>	
Name (Print/Type)	Joseph E. Chovanec	Registration No.	33481
Signature		Telephone	610 648 2004
		Date	10-20-04

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